

U.S. Department of Justice
U.S. Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
Acela Romanello

SEP 04 2014

COURT CASE NUMBER
5:14-CV-452-BO

DEFENDANT

Summer Place Home Owners Association of Raleigh, et al

TYPE OF PROCESS
Summons and Complaint

U.S. Marshals Service, EDNC

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Summer Place Home Owners Association of Raleigh

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

3700 National Drive, Suite 203, Raleigh, NC 27612

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Acela Romanello
5317 Cottage Bluff Lane
Knightdale, NC 27545

Number of process to be
served with this Form 285

1

Number of parties to be
served in this case

2

Check for service
on U.S.A.

x

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:

Mary Fio

☐ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

9/4/14

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 516

District to
Serve

No. 516

Signature of Authorized USMS Deputy or Clerk

Careel Smith

Date

9-4-14

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

9-15-14

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Careel Smith

Service Fee

800

Total Mileage Charges
including endeavors

Forwarding Fee

Total Charges

800

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

800 - 80.00

REMARKS: 9-10-14 CM 7013 2630 0001 7635 3322

9-18-14 see attached

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

Case 5:14-cv-00452-BO Document 5 Filed 09/04/14 Page 5 of 6
Case 5:14-cv-00452-BO Document 7 Filed 09/22/14 Page 1 of 2

PRIOR EDITIONS MAY BE USED

FILED

SEP 22 2014

Form USM-285
JULIE A. RICHARDS, CLERK
U.S. DISTRICT COURT, ED NC
DEPUTY

English

Customer Service

USPS Mobile

Search USPS.com or Track Packages Subr



Quick Tools

Ship a Package

Send Mail

Manage Your Mail

Shop

Business Solutions

USPS Tracking™



Customer Service >
Have questions? We're here to help.

Tracking Number: 70132630000176353322

Product & Tracking Information

Postal Product:

Features:
Certified Mail™

September 15, 2014, 9:45 am	Delivered	RALEIGH, NC 27612
Your item was delivered at 9:45 am on September 15, 2014 in RALEIGH, NC 27612.		
September 13, 2014, 7:39 am	Business Closed	RALEIGH, NC 27612
September 13, 2014, 6:53 am	Arrived at Unit	RALEIGH, NC 27612

Available Actions

Text Updates

Email Updates

Return Receipt After Mailing

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Summer Place Home Owners Association of Raleigh
3700 National Drive, Suite 203
Raleigh, NC 27612

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes"YES, enter delivery address below: ☐ No

Mail Type

Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

514 CV 45260

2. Article Number

(Transfer from service label)

7013 2630 0001 7635 3322

PS Form 3811, July 2013

Domestic Return Receipt

OTHER USPS SITES

Business Customer Gateway >
Postal Inspectors >
Inspector General >
Postal Explorer >
National Postal Museum >